

AO 435 (Rev. 04/18)		ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS		FOR COURT USE ONLY	
TRANSCRIPT ORDER				DUE DATE:	
Please Read Instructions:					
1. NAME Natalie Wilson / Langley & Banack, Inc.		2. PHONE NUMBER (210) 736-6600		3. DATE 1/27/2021	
4. DELIVERY ADDRESS OR EMAIL nwilson@langleybanack.com		5. CITY San Antonio		6. STATE TX	7. ZIP CODE 78212
8. CASE NUMBER 20-5027-rbk (Adversary)	9. JUDGE Ronald B. King	DATES OF PROCEEDINGS			
		10. FROM Jan.11,12,13,15,21		11. TO	
12. CASE NAME KrisJenn Ranch et al. v. DMA Properties, Inc. et al.		LOCATION OF PROCEEDINGS			
		13. CITY San Antonio		14. STATE TX	
15. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CIVIL		<input checked="" type="checkbox"/> BANKRUPTCY	
		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER	
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					
PORTIONS		DATE(S)		PORTION(S)	
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)					
<input type="checkbox"/> OPENING STATEMENT (Defendant)					
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)					
<input type="checkbox"/> OPINION OF COURT					
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING				Entire proceeding thus far	
<input type="checkbox"/> BAIL HEARING				Jan. 11,12,13,15 & 21	
17. ORDER					
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
3-Day	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	0.00
18. SIGNATURE <i>Natalie Wilson</i>				PROCESSED BY <i>ALDona</i>	
19. DATE 1/27/2021				PHONE NUMBER (210) 472-6720 ext. 5738	
TRANSCRIPT TO BE PREPARED BY Exceptional Reporting Services, Inc. P.O. Box 8365 Corpus Christi, TX 78468				COURT ADDRESS 615 S. Houston, Ste 597 San Antonio, TX 78205	
ORDER RECEIVED	DATE 1/27/21	BY <i>ALDona</i>			
DEPOSIT PAID					
TRANSCRIPT ORDERED	1/27/21	<i>ALDona</i>			
TRANSCRIPT RECEIVED					
ORDERING PARTY NOTIFIED TO PICK-UP TRANSCRIPT					
PARTY RECEIVED TRANSCRIPT					
			DEPOSIT PAID		
			TOTAL CHARGES	0.00	
			LESS DEPOSIT	0.00	
			TOTAL REFUNDED		
			TOTAL DUE	0.00	

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ORDER RECEIPT

ORDER COPY